State of California  TRAVEL EXPENSE CLAIM  Traveler ID Unit Code 210  See Instructions and *Privacy Statement on Reverse Side  Traveler ID Unit Code 210  210								se Side	BK Trip? O YES O No						
								Pa	ige	of	_ Pages				
STD. 262 (REV. 10/92)  CLAIMANT'S NAME Fiscal Year  Karen Baker 2008-2009				2008TEC	1769	269-	SSN OR EMPLOYEE NUMBER* 269-52-5702				DEPAI OPI	RTMENT R			
POSITION Secretary of Volunteering and				CB/ID NO.: EXEMPT		Ca	California Volunteers						PCA# 11100	E NUMBER	
RESIDENCE ADDRESS*						1110 K Street Suite 210							916-323	3-7646	
971 Castec Dr.				ZIP CODE		CITY	Sacramento				STATE CA			ZIP CODE 95814	
Sacramento CA				95864		Sac			(7) TRANSPORTAT				(8)	(9)	
(1) MONTH/YEAR Oct 2009		(3) LOCATION	(4)	(5)	MEALS	<u> </u>	(6)	(A)	(B)	(C)	(D) PRIVATE CAR USE			TOTAL	
(2) DATE	TIME	LOCATION WHERE EXPENSES WERE INCURRED	LODGING	BREAK- FAST	LUNCH	O.T.,L/T, N/C, RELO. OR DINNER	INCIDENT- TALS	COST OF TRANS.	TYPE		MILES		BUSINESS EXPENSE	TOTAL EXPENSES FOR DAY	
10/25		Sac/Orange County				\$18.00				\$86.00	18	\$9.90		\$113.90	
10/26		Long Beach Orange County		\$6.00	\$9.75	\$18.00	\$6.00			\$9.00		\$0.00		\$48.75	
10/27		Jone Bluch		\$6.00			\$6.00			\$9.00		\$0.00		\$21.00	
10/28		Crango County/Sac		\$6.00			<del>\$6.00</del>			\$9.00	18	\$9.90		15:90 <del>\$30:90</del>	
	1315											\$0.00		\$0.00	
	-											\$0.00		\$0.00	
												\$0.00		\$0.00	
												\$0.00		\$0.00	
	-											\$0.00		\$0.00	
	-											\$0.00		\$0.00	
												\$0.00		\$0.00	
						·						\$0.00		\$0.00	
							10 =		-		-	\$0.00		199.55	
(10)	enio.	TOTALS	1	\$18.00	\$9.75	\$36.00	12.00 \$18.00			104.0	\$3	6 19.8	φ	\$ <del>214.55</del>	
		OLUMNICODE (ACCTG USE)	DNELY)										199.53	<del>-</del>	
										CLAIM			4	214.55	
(11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required)  Attended the Women's Conference.											(13) PRIVATE VEHICLE LICENSE NUMBER				
										4ybd289  (14) MILEAGE RATE CLAIMED					
										8888					
										AGENCY ACCOUNTING OFFICE USE ONLY PAID BY REVOLVING FUND CHECK NUMBER					
OFFICE OF PLANKING & RESERBICH ADMINISTRATIVE S. WIDES									\$0.55						
THER private	EBY CERT	IFY That the above is a true statement of the chicle was used, and if mileage rates excended the met the requirements as prescribed.	the travel expensed the minimum	es incurred by	me in accord	lance with DP. of operating the and 0754 per	A rules in the e vehicle was taining to veh	service of the S equal to or gre icle safety and	State o ater th	of California. Ian the rate Belt usage.	. If a				
		I have met the requirements as prescribed	J DY GAIN SECTION	DATE	25/10	7 (19)8	IGNATURE	OF OFFICER A	PPRO	VING TRA	ÆL AND	PAYMENT	DATE /	5.09	
Į	1100	17/1		110/	MU		$\overline{u}$	11 J. U	NOX.	$\nu \cup \nu$			11.		